STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
Insurance Division – Agent Licensing
500 James Robertson Parkway
Nashville, TN  37243-1134
615 741-2693

LICENSING PROCEDURES
FOR AUTOMOBILE CLUB AGENTS (MOTOR CLUB AGENTS)

Requirements for an Automobile Club (Motor Club) Agent License

1. Completed, signed and notarized application
2. $20.00 filing fee
3. Representative of the Club must sign and certify page 3 of application
4. Applicant must hold a current insurance license with the State of Tennessee OR provide a Personnel Selection Report/Criminal Background Check with application for licensure
5. Note: All Automobile Club Agent licenses will expire annually on June 30

Renewal Period
Renewal period begins forty-five days prior to the license expiration date.

Fees
(1) Application Filing Fee - $20.00
(2) Automobile Club Agent Renewal Fee - $20.00

Termination of Agent from Automobile Club
(1) Automobile Club must file a Termination Affidavit for Auto Club Agent License form
(2) Affidavit must be completed and signed by a representative of the Auto Club
(3) Form must be notarized

Request for Forms
Forms may be found on our website: www.tn.gov/commerce/section/insurance.

Mail completed application, fee and all attachments to:
Tennessee Department of Commerce and Insurance
Agent Licensing Section
500 James Robertson Parkway
Nashville, TN  37243-1134

NOTE: BY DEPARTMENTAL REQUEST, PLEASE ENCLOSE MONEY ORDER, CERTIFIED CHECK OR CASHIERS CHECK FOR LICENSING FEES.

Rev. 02/16
TN Code 55-18-101 thru 109
# APPLICATION

For Agent’s Representative’s License to Solicit
Automobile Club or Association Memberships
(Must be printed or typed)

1. Name of Applicant: _________________________________________________________________
   First   Middle                               Last

2. Resident Address:  __________________________________________________________________
   Physical Street Address                                    City                    State                Zip            County
   Business Address:  __________________________________________________________________
   Physical Street Address                                    City                    State                Zip            County
   Home Phone Number:____________________  Business Phone Number:_______________________
   Email Address:______________________________________________________________________

3. SSN#_________________________________   Date of Birth_________________________________

4. Are you a United States citizen?  Yes_____ No_____
   Non-citizens must provide two forms of documentation of identity and immigration status.

5. Occupation and place of business for the past five years (attach separate sheet if needed):
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________

6. Has applicant ever held a license to solicit automobile club or association memberships in
   Tennessee?                                               Yes_____ No_____ 
   If yes, state when licensed, ID number, and name of club or association.
   ________________________________________________________________________________

7. Does applicant hold a current Tennessee Insurance Producer’s license?       Yes_____ No_____ 
   If yes, state when licensed, **producer ID number, and name of insurance carrier.**
   ________________________________________________________________________________

8. Has applicant ever held a license to solicit automobile club or association memberships or insurance
   contracts in any state other than Tennessee?       Yes_____ No_____ 
   If yes, state when licensed, state and name of insurance carrier.
   ________________________________________________________________________________
9. Has applicant ever been refused or had suspended or revoked a license to solicit automobile club, association memberships or insurance in any state?  
   Yes_____ No_____  
   If yes, give full explanation._______________________________________________________________________________
_______________________________________________________________________________

10. Has applicant ever been convicted of, or are currently charged with a criminal offense?  
    Yes_____ No_____  
    If yes, complete detail below and enclose copies of legal documentation and a written statement regarding offense(s).  
    Date of Offense_______________ Offense___________________________________________
    Time served in any penal institution:  From ____________to_____________
    If more than one offense, list each offense separately.______________________________________________________________________________
______________________________________________________________________________

11. Name of current employer:  ______________________________________________________

12. Automobile Club or Association you are making application to represent (provide name of club):
_____________________________________________________________________________

I hereby certify upon my oath that all my answers supporting this application are true. Permission is granted to furnish the Tennessee Department of Commerce and Insurance a copy of the Personnel Selection Report/Criminal Background Check.

Signature of Applicant ________________________________ Date __________________________

State______________ County ___________

Subscribed and sworn to before me
this _____ day of ________________, 20___

________________________________________  Notary Public

My commission expires_____________________

NOTE: APPLICATION WILL NOT BE PROCESSED WITHOUT PROPER NOTARIZATION
To the Commissioner of the Department of Commerce and Insurance, State of Tennessee,

In support of the attached application of ________________________________
(Name of applicant)
for a license to solicit automobile memberships, ____________________________
(Name of automobile club or association)

_________________________, hereby certifies that:

1. The applicant is a resident of the state of _______________ and is at least 18 years of age.

2. The applicant is personally known to the official of the automobile club or association making this certification.

3. ________________________ has investigated the character and background of the applicant
(Name of automobile club or association)
and is satisfied that he or she is trustworthy and qualified to act as a representative to solicit memberships in our automobile club or association in the State of Tennessee.

4. The applicant has read and is familiar with Title 55, Chapter 18, Automobile Clubs and Associations, Tennessee Code Annotated.

Issued this __________ day of ____________, 20____

____________________________________________
Name of Club or Association

____________________________________________
Address of Automobile Club or Association

____________________________________________
Phone Number

By: ______________________________________________
Name and Official Title

NOTE:
Unless applicant holds a current insurance producer license as a resident in the State of Tennessee, a PERSONNEL SELECTION REPORT must be attached to this application.
AUTO CLUB AGENT LICENSE TERMINATION AFFIDAVIT
(To be completed by Automobile Club Only)

RE: ______________________________________  ______________________
    (Name of Automobile Club Agent)                                                                               (TN License Number)

This Affidavit is to serve as written notification that   _________________________________
    (Name of Automobile Club)
has made every effort to recover the original license(s) of the above referenced (or attached listing of)
terminated Motor Club Agent(s) by contacting the Agent(s).

We are unable to return the original license(s) for the following reason:

_____License not available at Branch Office
_____Agent cannot locate original license
_____No response to request / mail returned / no forwarding address
_____License attached

___________________________________________
Signature of Automobile Club Representative

____________________________________________
Title

State________________
County______________

Subscribed and sworn to before me
this _____ day of _________________, 20__

________________________________________
Notary Public

My commission expires ____________________

(revised 02/16)